PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective Sandary 1, 2005								10	BG.	5 X	38	
			S FILED - PART (Column 1)		(Column 2)		SMALI TYPE	SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			62				RAT	E	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	BASIC FEE 375.00		OR		
TOTAL CHARGEABLE CLAIMS			€ minus 20=		. 42		X\$ 9	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			Q 0 minus 3 = *			7	X42=			1	X84=	456
MULTIPLE DEPENDENT CLAIM P			RESENT					+		OR		1458
*	the differenc	e in column 1 is	less than zero, enter "0" in column 2				+140			OR	+280=	
CLAIMS AS AMENDED - PART II						TOTA	L		OR	TOTAL	2934	
(Column 1)				(Column 2) (Column 3)				L ENT	ПТҮ	OR	OTHER SMALL	
4	CLAIMS			EST				DDI-				
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA	RATE	E TIC	ONAL EEE		RATE	ADDI- TIONAL FEE
	Total	1. P.1	Minus	** 6	2_	-5,	X\$ 9:	-		OR	X\$18=	90
	Independent FIRST PRES	ENTATION OF M	Minus	FPENDENT	CLAIM	= 8	X42=			OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			OR	+280=	
							TOT. ADDIT. FI			L	TOTAL ADDIT. FEE	90
		(Column 1)		(Colum	nn 2)	(Column 3)	ADDII. FI	:		J · · <i>p</i>	WUII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA	RATE	TIO	DDI- NAL EE		RATE	ADDI- TIONAL FEE
	T tal	•	Minus	**		=	X\$ 9=			OR	X\$18=	
	Ind pendent	pendent * Minus *** ST PRESENTATION OF MULTIPLE DEPENDENT OF		<u> </u>	-	X42=			OR	X84=		
	FINOI FRESE	ENTATION OF MI	JUNPLE DE	PENDENT	CLAIM		+140=			OR	+280=	
							TOTA	IL .		OR .	TOTAL	
		(Column 1)		(Colum	n 2)	(Column 3)	ADDIT. FE	E L		On A	ODIT. FEE	
ပ		CLAIMS		HIGHE	ST	(Column 3)		1				
MENDMENT		REMAINING AFTER AMENDMENT		PREVIOI PAID F	USLY	PRESENT EXTRA	RATE	AD TIOI FE	NAL	•	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	1		OR	X\$18=	
	Independent		Minus	***		-	X42=	-	[`	⁵		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							╀	(°	OR	X84=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
[If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT, FEE	
1	he "Highest Nurr	nber Previously Paid	d For (Total o	or Independen	it) is the	i 3, enter "3." highest number	ADDIT. FEI		ite box i			